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Queensland							(Affix identification label here)									
G	overnme	nt		URN:												
		Family name:														
Alc	ithdrav	Given name(s):														
		4	AWS			Address:										
Facility:						Date of birth: Sex: M F I										
Last Alc					Date											
Date:	1		1													
Time:	ime: : AM / PM															
Perspiration	0. Nil 1. Moiet ekin															
Tremor	O. No tremor T. Tremor can be felt in fingers Visible tremor but mild Moderate tremor, arms out Severe, arms not extended															
Anxiety	O. Calm I. Uneasy Apprehensive Fearful, slow to calm Unable to calm / panic															
Agitation	Able to rest Unsettled, fidgety															
Temperati	0. < 37.0c 1. 37.1c - 37.5c															
Hallucinat Specify if: V = Visual T = Tactile A = Auditor	ations 0. Lucid 1. Infrequent, aware 2. Brief, persuadable a. Frequent, distressed															
Orientatio	Fully oriented I. Unsure of time															
					Total											
Scale (mm)	Blood pr	essu	re													
• 1	Pulse															
• 2	Temperature															
3	Respirat	ions														
4 5	Conscious level 1. Alert, obeys, oriented 2. Confused, response to speech 3. Stuporous, response to pain 4. Semi-comatose 5. Comatose															
6	Pupils	- В	Reactive No Reaction Brisk	Left Right	Size Reaction Size											
7	M- 2		Sluggish	g.it	Reaction	-										
	Medication given?															
8	Nurse in	itials														

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Queensland Government Alcohol Withdrawal Scale							(Affix identification label here) URN:									
							Ald	cohol		Given name(s):						
			AWS			Address:										
						Date of birth: Sex: M F I										
Last Alc	obol IIo				Date											
					Time											
Date:																
Time.	Bal															
Perspirati	body ly wet															
Tremor	in fingers mild irms out extended															
Anxiety	m anic															
4. Unable to calm / panic 0. Able to rest 1. Unsettled, fidgety Agitation 2. Restless, tossing, turning 3. Excitable, pacing 4. Constant movement																
0. < 37.0c																
4. > 38.5c Hallucinations Specify if: V = Visual T = Tactile 4. > 38.5c 0. Lucid 1. Infrequent, aware 2. Brief, persuadable 3. Frequent, distressed																
A = Auditory 4. No meaningful reality 0. Fully oriented 1. Unsure of time 2. Unsure time, place 3. Unsure time, place, persor 4. Disorientated																
					Total											
Scale (mm) Blood pressure																
• 1	Pulse															
• 2	Tempera															
3	Respirati	ions	 S													
4	Conscious 1. Alert, obeys, oriented 2. Confused, response to speech 3. Stuporous, response to pain															
level 4. Semi-comatose 5. Comatose																
		+ Reactive		Left	Size											
6	Pupils	- В	No Reaction Brisk		Reaction Size											
		s	Sluggish	Right	Reaction											
7	Medication given?															

Source: NSW Health Department 1999, New South Wales Detoxification Clinical Practice Guidelines, NSW Health Department, ISBN 0 7347 3034.

Nurse initials